DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 02/24/2006

Provider Inspection Summary

For the period 01/01/2003 to 12/31/2005 Residential Care Apartment Complex CERTIFIED STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: INDEPENDENT LIVING RETIREMENT COMMUNITY (0010306)

Address: 602 NORTH SEGOE RD, MADISON, WI 53705

License Status: REGULAR

Licensed/Certified/Registered 04/01/2003

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0092277 End Date: 03/30/2004 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091364 End Date: 08/26/2003 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Complaint History

Date Complaint Received: 07/18/2003 Date Investigation Completed: 08/26/2003

Subject Area(s) Result

ADMINISTRATION NOT SUBSTANTIATED